



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 5198

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/674,371    |                                  | 128   | 3773           | END5098-0515140        |

## APPLICANTS

Don A. Tanaka, Saratoga, CA;  
 Mark S. Ortiz, Milford, OH;  
 Darrel Powell, Cincinnati, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

03/16/2004

| Foreign Priority claimed       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |                 |              |                    |
| Verified and                   | <input type="checkbox"/> Met after Allowance                        |                  |                 |              |                    |
| Acknowledged                   | /MELISSA K<br>RYCKMAN/<br>Examiner's Signature                      | Initials         | CA              | 21           | 18                 |

## ADDRESS

FROST BROWN TODD, LLC  
 2200 PNC CENTER  
 201 E. FIFTH STREET  
 CINCINNATI, OH 45202  
 UNITED STATES

## TITLE

Anastomosis wire ring device

|                             |   |  |
|-----------------------------|---|--|
| FILING FEE RECEIVED<br>1030 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                             |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                             |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                             |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|                             |   | <input type="checkbox"/> Other _____                         |
|                             |   | <input type="checkbox"/> Credit                              |